

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Illinois Republican Party

ADDRESS (number and street)

P.O. Box 64897

☐Check if different
than previously
reported. (ACC)

Chicago

IL

60664

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00005926

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☒

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

04

01

2009

through

04

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dave Syverson, Treasurer

Signature of Treasurer

Electronically Filed by Dave Syverson, Treasurer

Date

05

20

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Illinois Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	4	3	0	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2009		148242.84
(b) Cash on Hand at Beginning of Reporting Period	280091.02	
(c) Total Receipts (from Line 19)	76142.23	604041.93
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	356233.25	752284.77
7. Total Disbursements (from Line 31)	173285.85	569337.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	182947.40	182947.40
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Illinois Republican Party

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	9080.00	208630.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	47162.23	206332.53
(iii) TOTAL (add Lines 11(a)(i) and (ii)	56242.23	414962.53
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	56242.23	414962.53
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	400.00	1662.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	8.57
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	19500.00	187408.83
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	19500.00	187408.83
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	76142.23	604041.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	56642.23	416633.10

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	46581.67	110438.50
(ii) Non-Federal Share.....	123492.80	350238.45
(b) Other Federal Operating Expenditures.....	3211.38	95401.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	173285.85	556078.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	12142.37
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	600.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	516.80
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	516.80
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	173285.85	569337.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	49793.05	219098.92

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	56242.23	414962.53
34. Total Contribution Refunds (from Line 28(d))	0.00	600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	56242.23	414362.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	49793.05	205839.75
37. Offsets to Operating Expenditures (from Line 15, page 3)	400.00	1662.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	49393.05	204177.75

SCHEDULE L (FEC Form 3X)

6 / 67

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

NAME OF COMMITTEE (In Full)
Illinois Republican Party

NAME OF ACCOUNT
LEVIN

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	10000.00
c. Total.....	0.00	10000.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	10000.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	4020.00	14520.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	4020.00	14520.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	4500.00	5000.00
8. RECEIPTS..... (from Line 3)	0.00	10000.00
9. SUBTOTAL..... (Add Lines 7 and 8)	4500.00	15000.00
10. DISBURSEMENTS..... (From Line 6)	4020.00	14520.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	480.00	480.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Jacqueline Davidson

Mailing Address 1718 Liston Ct

City

Normal

State

IL

Zip Code

61761-2340

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 0 9

Transaction ID: 90414.C305381

Amount of Each Receipt this Period

325.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Richard Duchossois

Mailing Address 65 Spring Creek Rd.

City

Barrington

State

IL

Zip Code

60010-9636

FEC ID number of contributing
federal political committee.

C

Name of Employer
Arlington Intl Racecourse

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 9

Transaction ID: 90413.C305193

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Thomas Fitzgibbon, Sr.

Mailing Address 9640 Reding Circle

City

Des Plaines

State

IL

Zip Code

60016-1551

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 9

Transaction ID: 90413.C305094

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

875.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Gregory Folley

Mailing Address 6526 N Saint Marys Rd

City

Peoria

State

IL

Zip Code

61614-2830

FEC ID number of contributing
federal political committee.

C

Name of Employer
Caterpillar, Inc.

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 9

Transaction ID: 90519.C305998

Amount of Each Receipt this Period

330.00

Receipt

B.

Full Name (Last, First, Middle Initial)

John Hutchinson

Mailing Address 2124 E 1730 North Rd

City

Watseka

State

IL

Zip Code

60970-7505

FEC ID number of contributing
federal political committee.

C

Name of Employer
STH Holdings

Occupation

Banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 9

Transaction ID: 90413.C305096

Amount of Each Receipt this Period

150.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Patricia Kennell

Mailing Address 900 W. Grand Oak Dr.

City

Peoria

State

IL

Zip Code

61615-1150

FEC ID number of contributing
federal political committee.

C

Name of Employer
Versa Press, Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 9

Transaction ID: 90519.C305991

Amount of Each Receipt this Period

275.00

Receipt

SUBTOTAL of Receipts This Page (optional)

755.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Anthony Kesman

Mailing Address 1200 Longmeadow Ln

City

Lake Forest

State

IL

Zip Code

60045-1581

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allegiance Healthcare Cor-
p.

Occupation
Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 9

Transaction ID: 90413.C305097

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Judson Morrison

Mailing Address 23 N Green St Apt 306

City

Chicago

State

IL

Zip Code

60607-2780

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 9

Transaction ID: 90413.C304719

Amount of Each Receipt this Period

275.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Aidan Mullett

Mailing Address 1187 Hawkweed Lane

City

Lake Forest

State

IL

Zip Code

60045-1101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carney Management Co.

Occupation
Investment Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 0 9

Transaction ID: 90413.C305234

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

775.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Robert Myers

Mailing Address R.R. 2, Box 52

City

Clinton

State

IL

Zip Code

61727-9568

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 7 / 2 0 0 9

Transaction ID: 90413.C304889

Amount of Each Receipt this Period

450.00

Receipt

B.

Full Name (Last, First, Middle Initial)

John Ovitz

Mailing Address 427 S. Main St.

City

Sycamore

State

IL

Zip Code

60178-2228

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 8 / 2 0 0 9

Transaction ID: 90519.C306062

Amount of Each Receipt this Period

300.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Philip Purcell

Mailing Address 27W332 Churchill Road

City

Winfield

State

IL

Zip Code

60190

FEC ID number of contributing
federal political committee.

C

Name of Employer
Continental Investors, LLC

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 0 9

Transaction ID: 90413.C304668

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Edward Roob

Mailing Address 841 Woodbine Lane

City

Northbrook

State

IL

Zip Code

60062-3439

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 4 / 2 0 0 9

Transaction ID: 90414.C305390

Amount of Each Receipt this Period

600.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Phil Treuthart

Mailing Address PO Box 255

City

Kincaid

State

IL

Zip Code

62540-0255

FEC ID number of contributing
federal political committee.

C

Name of Employer
Secretary of State

Occupation
A A III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 7 / 2 0 0 9

Transaction ID: 90413.C304914

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Phil Treuthart

Mailing Address PO Box 255

City

Kincaid

State

IL

Zip Code

62540-0255

FEC ID number of contributing
federal political committee.

C

Name of Employer
Secretary of State

Occupation
A A III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 1 / 2 0 0 9

Transaction ID: 90519.C305751

Amount of Each Receipt this Period

75.00

Receipt

SUBTOTAL of Receipts This Page (optional)

775.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

James Walters

Mailing Address 1802 Fox Point Circle

City

Port Byron

State

IL

Zip Code

61275

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 9

Transaction ID: 90519.C305985

Amount of Each Receipt this Period

150.00

Receipt

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

9080.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 67

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)

Southwest Publishing

Mailing Address 2600 NW Topeka Blvd.

City

Topeka

State

KS

Zip Code

66617-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1524.10

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 9

Transaction ID: 90413.C305213

Amount of Each Receipt this Period

390.00

Offsets to Operating Expe-
nditu

NOTE: REFUND FUNDRAISING
MAIL

SUBTOTAL of Receipts This Page (optional)

390.00

TOTAL This Period (last page this line number only)

390.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 67

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) American Express Establishment Services	Transaction ID: 90519.E21396 Date of Disbursement																				
Mailing Address P.O. Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	0	9												
City Phoenix State AZ Zip Code 85072-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing	<table border="1"> <tr> <td colspan="10">4.95</td> </tr> </table>	4.95																			
4.95																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ CREDIT CARD PROCESSING																				
B. Full Name (Last, First, Middle Initial) American Express Establishment Services	Transaction ID: 90519.E21398 Date of Disbursement																				
Mailing Address P.O. Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	2		2	0	0	9												
City Phoenix State AZ Zip Code 85072-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing	<table border="1"> <tr> <td colspan="10">1.55</td> </tr> </table>	1.55																			
1.55																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ CREDIT CARD PROCESSING																				
C. Full Name (Last, First, Middle Initial) American Express Establishment Services	Transaction ID: 90519.E21399 Date of Disbursement																				
Mailing Address P.O. Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	6		2	0	0	9												
City Phoenix State AZ Zip Code 85072-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing	<table border="1"> <tr> <td colspan="10">1.71</td> </tr> </table>	1.71																			
1.71																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ CREDIT CARD PROCESSING																				

SUBTOTAL of Disbursements This Page (optional)

8.21

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 67

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) American Express Establishment Services	Transaction ID: 90519.E21400 Date of Disbursement																				
Mailing Address P.O. Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	9		2	0	0	9												
City Phoenix State AZ Zip Code 85072-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Candidate Name	<table border="1"> <tr> <td colspan="10">0.78</td> </tr> </table>	0.78																			
0.78																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
CREDIT CARD PROCESSING																					
B. Full Name (Last, First, Middle Initial) American Express Establishment Services	Transaction ID: 90519.E21401 Date of Disbursement																				
Mailing Address P.O. Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	3		2	0	0	9												
City Phoenix State AZ Zip Code 85072-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Candidate Name	<table border="1"> <tr> <td colspan="10">1.86</td> </tr> </table>	1.86																			
1.86																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
CREDIT CARD PROCESSING																					
C. Full Name (Last, First, Middle Initial) American Express Establishment Services	Transaction ID: 90519.E21402 Date of Disbursement																				
Mailing Address P.O. Box 53852	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	4		2	0	0	9												
City Phoenix State AZ Zip Code 85072-	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Candidate Name	<table border="1"> <tr> <td colspan="10">2.64</td> </tr> </table>	2.64																			
2.64																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
CREDIT CARD PROCESSING																					

SUBTOTAL of Disbursements This Page (optional)

5.28

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 67

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
American Express Establishment Services

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-

Purpose of Disbursement
Credit Card Processing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90519.E21403

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.19

CREDIT CARD PROCESSING

B. Full Name (Last, First, Middle Initial)
American Express Establishment Services

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-

Purpose of Disbursement
Credit Card Processing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90519.E21404

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.34

CREDIT CARD PROCESSING

C. Full Name (Last, First, Middle Initial)
American Express Establishment Services

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-

Purpose of Disbursement
Credit Card Processing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90519.E21405

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.37

CREDIT CARD PROCESSING

SUBTOTAL of Disbursements This Page (optional)

12.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 67

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
American Express Establishment Services

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-

Purpose of Disbursement
Credit Card Processing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90519.E21406

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.81

CREDIT CARD PROCESSING

B. Full Name (Last, First, Middle Initial)
American Express Establishment Services

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-

Purpose of Disbursement
Credit Card Processing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90519.E21407

Date of Disbursement

/ /

Amount of Each Disbursement this Period

0.78

CREDIT CARD PROCESSING

C. Full Name (Last, First, Middle Initial)
Certege Merchant Relations

Mailing Address P.O. Box 30070 TA-02

City Tampa State FL Zip Code 33630-

Purpose of Disbursement
Credit Card Processing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90519.E21410

Date of Disbursement

/ /

Amount of Each Disbursement this Period

563.24

CREDIT CARD PROCESSING

SUBTOTAL of Disbursements This Page (optional)

568.83

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 67

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A. Full Name (Last, First, Middle Initial) Certegy Merchant Relations	Transaction ID: 90519.E21411 Date of Disbursement																				
Mailing Address P.O. Box 30070 TA-02	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	9		2	0	0	9												
<table border="1"> <tr> <td>City Tampa</td> <td>State FL</td> <td>Zip Code 33630-</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Credit Card Processing</td> <td rowspan="2"> <input type="text"/> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tampa	State FL	Zip Code 33630-	Purpose of Disbursement Credit Card Processing		<input type="text"/> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>24.95</td> </tr> </table>	24.95											
City Tampa	State FL	Zip Code 33630-																			
Purpose of Disbursement Credit Card Processing		<input type="text"/> Category/ Type																			
Candidate Name																					
24.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ CREDIT CARD PROCESSING																				
B. Full Name (Last, First, Middle Initial) Certegy Merchant Relations	Transaction ID: 90519.E21551 Date of Disbursement																				
Mailing Address P.O. Box 30070 TA-02	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	4		2	0	0	9												
<table border="1"> <tr> <td>City Tampa</td> <td>State FL</td> <td>Zip Code 33630-</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Credit Card Processing</td> <td rowspan="2"> <input type="text"/> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tampa	State FL	Zip Code 33630-	Purpose of Disbursement Credit Card Processing		<input type="text"/> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00											
City Tampa	State FL	Zip Code 33630-																			
Purpose of Disbursement Credit Card Processing		<input type="text"/> Category/ Type																			
Candidate Name																					
25.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ CREDIT CARD PROCESSING																				
C. Full Name (Last, First, Middle Initial) EDonation 1 Account	Transaction ID: 90413.E21392 Date of Disbursement																				
Mailing Address 118 N. Saint Asaph St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	3		2	0	0	9												
<table border="1"> <tr> <td>City Alexandria</td> <td>State VA</td> <td>Zip Code 22314-</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Internet Fundraising</td> <td rowspan="2"> <input type="text"/> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Alexandria	State VA	Zip Code 22314-	Purpose of Disbursement Internet Fundraising		<input type="text"/> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>46.71</td> </tr> </table>	46.71											
City Alexandria	State VA	Zip Code 22314-																			
Purpose of Disbursement Internet Fundraising		<input type="text"/> Category/ Type																			
Candidate Name																					
46.71																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ INTERNET FUNDRAISING																				

SUBTOTAL of Disbursements This Page (optional) ►

96.66

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 67

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Illinois Republican Party

A.

Full Name (Last, First, Middle Initial)
The Northern Trust Company

Mailing Address 50 S. La Salle St.

City Chicago State IL Zip Code 60675-

Purpose of Disbursement
Service Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90519.E21573

Date of Disbursement

/ /

Amount of Each Disbursement this Period

19.50

SERVICE FEE

B.

Full Name (Last, First, Middle Initial)
The Stoneridge Group, LLC

Mailing Address 554 West Main Street
Building A, Suite 200

City Buford State GA Zip Code 30518-

Purpose of Disbursement
Website

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90519.E21444

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

WEBSITE

SUBTOTAL of Disbursements This Page (optional)

2519.50

TOTAL This Period (last page this line number only)

3211.38

SCHEDULE H2 (FEC Form 3X)**ALLOCATION RATIOS**

PAGE 20 / 67

NAME OF COMMITTEE (In Full)

Illinois Republican Party**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT
ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

ANNUAL DINNER

ACTIVITY IS:

☒ Fundraising ☐ Direct Candidate Support

CHECK IF THE RATIO IS:

☒ New ☐ Revised ☐ Same as Previously Reported

FEDERAL %

55.71 %

NONFEDERAL %

44.29 %**Transaction ID:**
H2190519.J75

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**PAGE 21 / 67
FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

NAME OF ACCOUNT

IL Republican Party
Northern Trust No

DATE OF RECEIPT

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 9

TOTAL AMOUNT TRANSFERRED

19500.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

19500.00

Transaction ID: H390519.C306782

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

19500.00

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

19500.00

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 22 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

The Guardian

Mailing Address

P.O. Box 8012

City	State	Zip Code
Appleton	WI	54913-8012

Purpose of Disbursement:
Non-FEA Health InsuranceCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

299573.18

Date

M	M
0	4

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21394

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1883.85

7086.85

8970.70

B. Full Name (Last, First, Middle Initial)

Internal Revenue Service

Mailing Address

P.O. Box 970010

City	State	Zip Code
Saint Louis	MO	63197-0010

Purpose of Disbursement:
Non-FEA Payroll TaxesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

307901.45

Date

M	M
0	4

 /

D	D
0	3

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21413

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1748.94

6579.33

8328.27

C. Full Name (Last, First, Middle Initial)

Internal Revenue Service

Mailing Address

P.O. Box 970010

City	State	Zip Code
Saint Louis	MO	63197-0010

Purpose of Disbursement:
Non-FEA Payroll TaxesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

389640.30

Date

M	M
0	4

 /

D	D
2	0

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21414

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2301.86

8659.40

10961.26

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5934.65

22325.58

28260.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 23 / 67
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Internal Revenue Service

Mailing Address

P.O. Box 970010

City State Zip Code
 Saint Louis MO 63197-0010

Purpose of Disbursement:
 Non-FEA Payroll Taxes

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

407266.97

Date M M / D D / Y Y Y Y
 0 4 / 3 0 / 2 0 0 9

Transaction ID: H490519.E21415

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.96		458.80		580.76

B. Full Name (Last, First, Middle Initial)
 Public Storage

Mailing Address

2400 Palmer Drive

City State Zip Code
 Schaumburg IL 60173-

Purpose of Disbursement:
 Storage

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

307996.45

Date M M / D D / Y Y Y Y
 0 4 / 0 3 / 2 0 0 9

Transaction ID: H490519.E21418

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.95		75.05		95.00

C. Full Name (Last, First, Middle Initial)
 Aristotle International

Mailing Address

205 Pennsylvania Ave., SE

City State Zip Code
 Washington DC 20003-

Purpose of Disbursement:
 Computer Software

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

311432.76

Date M M / D D / Y Y Y Y
 0 4 / 0 7 / 2 0 0 9

Transaction ID: H490519.E21420

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
315.00		1185.00		1500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
456.91		1718.85		2175.76

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 24 / 67
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Comcast Cable

Mailing Address

P.O. Box 3001

City State Zip Code

Southeastern PA 19398-

Purpose of Disbursement:
 Cable Television

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

316390.59

Date M M / D D / Y Y Y Y
 0 4 / 0 7 / 2 0 0 9

Transaction ID: H490519.E21421

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21.29

80.07

101.36

B. Full Name (Last, First, Middle Initial)
 LHF Specialty Advertising

Mailing Address

1106 North Stephens

City State Zip Code

Springfield IL 62702-

Purpose of Disbursement:
 Party Mementos

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

312115.64

Date M M / D D / Y Y Y Y
 0 4 / 0 7 / 2 0 0 9

Transaction ID: H490519.E21422

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

90.90

341.98

432.88

C. Full Name (Last, First, Middle Initial)
 Patton Boggs, LLP

Mailing Address

2550 M St NW

City State Zip Code

Washington DC 20037-1301

Purpose of Disbursement:
 Consulting: Legal

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

320541.29

Date M M / D D / Y Y Y Y
 0 4 / 0 7 / 2 0 0 9

Transaction ID: H490519.E21423

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

739.47

2781.82

3521.29

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

851.66

3203.87

4055.53

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 25 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

AT&T

Mailing Address

Bill Payment Center

City	State	Zip Code
Saginaw	MI	48663-

Purpose of Disbursement:
Telephone ServiceCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

309932.76

Date

M	M
0	4

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21424

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

47.00

176.83

223.83

B. Full Name (Last, First, Middle Initial)

FedEx

Mailing Address

P.O. Box 727

City	State	Zip Code
Memphis	TN	38101-2112

Purpose of Disbursement:
Parcel DeliveryCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

309708.93

Date

M	M
0	4

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21426

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.61

28.64

36.25

C. Full Name (Last, First, Middle Initial)

Ameren Cilco

Mailing Address

P.O. Box 66826

City	State	Zip Code
Saint Louis	MO	63166-

Purpose of Disbursement:
UtilitiesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

316649.78

Date

M	M
0	4

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21427

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

54.43

204.76

259.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

109.04

410.23

519.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 26 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

205 Randolph Investors, LLC

Mailing Address

205 W. Randolph

City State Zip Code

Chicago IL 60606-

Purpose of Disbursement:
RentCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

316289.23

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	0	9

Transaction ID: H490519.E21428

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

876.45

3297.14

4173.59

B. Full Name (Last, First, Middle Initial)

City Water Light & Power

Mailing Address

Municipal Center West

City State Zip Code

Springfield IL 62757-

Purpose of Disbursement:
UtilitiesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

317020.00

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	0	9

Transaction ID: H490519.E21429

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

77.75

292.47

370.22

C. Full Name (Last, First, Middle Initial)

Patricia Hurley & Associates, Inc.

Mailing Address

205 W. Wacker Drive, Ste. 1400

City State Zip Code

Chicago IL 60606-

Purpose of Disbursement:
Reimbursement: See BelowCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

308050.45

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	7	/	2	0	0	9

Transaction ID: H490519.E21430

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11.34

42.66

54.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

965.54

3632.27

4597.81

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 27 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

430 Auto Parks

Mailing Address

430 S. Wabash Avenue

City State Zip Code

Chicago

IL

60605-

Purpose of Disbursement:
Parking ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31**[MEMO ITEM]** Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54.00

Date

M	M
0	4

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21441

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11.34

42.66

54.00

B. Full Name (Last, First, Middle Initial)

Puritan Springs Water

Mailing Address

1709 North Kickapoo

City State Zip Code

Lincoln

IL

62656-

Purpose of Disbursement:
Bottled WaterCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

309672.68

Date

M	M
0	4

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21442

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.67

17.56

22.23

C. Full Name (Last, First, Middle Initial)

Watts Copy System

Mailing Address

2860 Stanton Avenue

City State Zip Code

Springfield

IL

62708-

Purpose of Disbursement:
Copier LeaseCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

311682.76

Date

M	M
0	4

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21443

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

52.50

197.50

250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

57.17

215.06

272.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 28 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Vista Realty, Inc.

Mailing Address

220 W. Carpenter St.

City	State	Zip Code
Springfield	IL	62702-

Purpose of Disbursement:
RentCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

309650.45

Date

M	M
0	4

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21445

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

336.00

1264.00

1600.00

B. Full Name (Last, First, Middle Initial)
PCI Compliance Service Dept.

Mailing Address

3200 East Guasti Road, Ste 300

City	State	Zip Code
Ontario	CA	91761-

Purpose of Disbursement:
Office SuppliesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

321020.44

Date

M	M
0	4

 /

D	D
0	8

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21446

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

79.87

300.48

380.35

C. Full Name (Last, First, Middle Initial)
PCI Compliance Service Dept.

Mailing Address

3200 East Guasti Road, Ste 300

City	State	Zip Code
Ontario	CA	91761-

Purpose of Disbursement:
Office SuppliesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

378679.04

Date

M	M
0	4

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21447

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

35.43

133.27

168.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

451.30

1697.75

2149.05

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 29 / 67
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Dairy Queen

Mailing Address

100 W. Randolph St

City State Zip Code

Chicago IL 60601-

Purpose of Disbursement:
FoodCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

320640.09

Activity or Event Identifier:
ADMINISTRATION B 31Date MM / DD / YYYY
04 / 08 / 2009

Transaction ID: H490519.E21449

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.85		22.01		27.86

B. Full Name (Last, First, Middle Initial)

Pats Pizza

Mailing Address

638 S. Clark Street

City State Zip Code

Chicago IL 60605-

Purpose of Disbursement:
FoodCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

320612.23

Activity or Event Identifier:
ADMINISTRATION B 31Date MM / DD / YYYY
04 / 08 / 2009

Transaction ID: H490519.E21450

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.90		56.04		70.94

C. Full Name (Last, First, Middle Initial)

Patricia Hurley & Associates, Inc.

Mailing Address

205 W. Wacker Drive, Ste. 1400

City State Zip Code

Chicago IL 60606-

Purpose of Disbursement:
Consulting: FundraisingCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

346020.44

Activity or Event Identifier:
ADMINISTRATION B 31Date MM / DD / YYYY
04 / 09 / 2009

Transaction ID: H490519.E21451

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5250.00		19750.00		25000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5270.75		19828.05		25098.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 30 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Curt Conrad

Mailing Address

2704 Cronin Dr

City

State

Zip Code

Springfield

IL

62711-7083

Purpose of Disbursement:

Non-FEA Payroll

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

370216.43

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Transaction ID: H490519.E21452

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

462.67

1740.52

2203.19

B. Full Name (Last, First, Middle Initial)

Curt Conrad

Mailing Address

2704 Cronin Dr

City

State

Zip Code

Springfield

IL

62711-7083

Purpose of Disbursement:

Mileage Reimbursement

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

371059.03

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Transaction ID: H490519.E21453

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

176.95

665.65

842.60

C. Full Name (Last, First, Middle Initial)

Curt Conrad

Mailing Address

2704 Cronin Dr

City

State

Zip Code

Springfield

IL

62711-7083

Purpose of Disbursement:

Reimbursement: See Memos

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

371100.29

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Transaction ID: H490519.E21454

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.66

32.60

41.26

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

648.28

2438.77

3087.05

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 31 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Curt Conrad

Mailing Address

2704 Cronin Dr

City

State

Zip Code

Springfield

IL

62711-7083

Purpose of Disbursement:

Non-FEA Payroll

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

426458.84

Activity or Event Identifier:

ADMINISTRATION B 31

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

Transaction ID: H490519.E21455

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

462.67

1740.52

2203.19

B. Full Name (Last, First, Middle Initial)

Curt Conrad

Mailing Address

2704 Cronin Dr

City

State

Zip Code

Springfield

IL

62711-7083

Purpose of Disbursement:

Mileage Reimbursement

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

426712.39

Activity or Event Identifier:

ADMINISTRATION B 31

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

Transaction ID: H490519.E21456

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

53.25

200.30

253.55

C. Full Name (Last, First, Middle Initial)

Curt Conrad

Mailing Address

2704 Cronin Dr

City

State

Zip Code

Springfield

IL

62711-7083

Purpose of Disbursement:

Reimbursement: See Memos

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

426925.81

Activity or Event Identifier:

ADMINISTRATION B 31

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

Transaction ID: H490519.E21457

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

44.82

168.60

213.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

560.74

2109.42

2670.16

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 32 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Priscilla R. DePree

Mailing Address

1945 N Sheffield Ave Apt 203

City

State

Zip Code

Chicago

IL

60614-5551

Purpose of Disbursement:

Non-FEA Payroll

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

358911.31

Date

M M

/

D D

/

Y Y

/

Y Y

0 4

1 5

2 0

0 9

Transaction ID: H490519.E21463

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

467.22

1757.62

2224.84

B. Full Name (Last, First, Middle Initial)

Priscilla R. DePree

Mailing Address

1945 N Sheffield Ave Apt 203

City

State

Zip Code

Chicago

IL

60614-5551

Purpose of Disbursement:

Non-FEA Payroll

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

415285.68

Date

M M

/

D D

/

Y Y

/

Y Y

0 4

3 0

2 0

0 9

Transaction ID: H490519.E21464

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

467.22

1757.62

2224.84

C. Full Name (Last, First, Middle Initial)

Priscilla R. DePree

Mailing Address

1945 N Sheffield Ave Apt 203

City

State

Zip Code

Chicago

IL

60614-5551

Purpose of Disbursement:

Reimbursement: See Memos

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

359114.79

Date

M M

/

D D

/

Y Y

/

Y Y

0 4

1 5

2 0

0 9

Transaction ID: H490519.E21466

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

42.73

160.75

203.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

977.17

3675.99

4653.16

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 33 / 67
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Priscilla R. DePree

Mailing Address

1945 N Sheffield Ave Apt 203

City	State	Zip Code
Chicago	IL	60614-5551

Purpose of Disbursement:
 Reimbursement: See Memos

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

415291.68

Date

M	M
0	4

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21467

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.26		4.74		6.00

B. Full Name (Last, First, Middle Initial)
 Steve Ettinger

Mailing Address

1221 Larchmont Dr

City	State	Zip Code
Springfield	IL	62704-2109

Purpose of Disbursement:
 Non-FEA Payroll

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

372323.28

Date

M	M
0	4

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21476

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
256.83		966.16		1222.99

C. Full Name (Last, First, Middle Initial)
 Steve Ettinger

Mailing Address

1221 Larchmont Dr

City	State	Zip Code
Springfield	IL	62704-2109

Purpose of Disbursement:
 Non-FEA Payroll

Category/Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

428148.80

Date

M	M
0	4

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21477

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
256.83		966.16		1222.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
514.92		1937.06		2451.98

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 34 / 67
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Steve Ettinger

Mailing Address

1221 Larchmont Dr

City

State

Zip Code

Springfield

IL

62704-2109

Purpose of Disbursement:
Mileage ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

372826.53

Date 04 / 15 / 2009

Transaction ID: H490519.E21479

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

105.68

397.57

503.25

B. Full Name (Last, First, Middle Initial)

Steve Ettinger

Mailing Address

1221 Larchmont Dr

City

State

Zip Code

Springfield

IL

62704-2109

Purpose of Disbursement:
Reimbursement: See MemosCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

372952.37

Date 04 / 15 / 2009

Transaction ID: H490519.E21480

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

26.43

99.41

125.84

C. Full Name (Last, First, Middle Initial)

Steve Ettinger

Mailing Address

1221 Larchmont Dr

City

State

Zip Code

Springfield

IL

62704-2109

Purpose of Disbursement:
Reimbursement: See MemosCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

428198.80

Date 04 / 30 / 2009

Transaction ID: H490519.E21481

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.50

39.50

50.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

142.61

536.48

679.09

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 35 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Sams Club

Mailing Address

P.O. Box 660617, Dept. 49

City	State	Zip Code
Dallas	TX	75266-0617

Purpose of Disbursement:
Office SuppliesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

390044.50

Date

M	M
0	4

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21483

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11.27

42.42

53.69

B. Full Name (Last, First, Middle Initial)
Jason Heffley

Mailing Address

305 Bradbury Lane

City	State	Zip Code
Bartlett	IL	60103-

Purpose of Disbursement:
Non-FEA PayrollCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

356409.65

Date

M	M
0	4

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21485

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

782.88

2945.12

3728.00

C. Full Name (Last, First, Middle Initial)
Jason Heffley

Mailing Address

305 Bradbury Lane

City	State	Zip Code
Bartlett	IL	60103-

Purpose of Disbursement:
Non-FEA PayrollCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

413060.84

Date

M	M
0	4

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21486

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

782.88

2945.12

3728.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1577.03

5932.66

7509.69

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 36 / 67
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Jason Heffley

Mailing Address

305 Bradbury Lane

City State Zip Code

Bartlett

IL

60103-

Purpose of Disbursement:
Reimbursement: See MemosCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

356686.47

Date M M / D D / Y Y Y Y

Transaction ID: H490519.E21488

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

58.13

218.69

276.82

B. Full Name (Last, First, Middle Initial)

Jason Heffley

Mailing Address

305 Bradbury Lane

City State Zip Code

Bartlett

IL

60103-

Purpose of Disbursement:
Mileage ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

391550.38

Date M M / D D / Y Y Y Y

Transaction ID: H490519.E21489

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

56.36

212.04

268.40

C. Full Name (Last, First, Middle Initial)

Jason Heffley

Mailing Address

305 Bradbury Lane

City State Zip Code

Bartlett

IL

60103-

Purpose of Disbursement:
Reimbursement: See MemosCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

391692.38

Date M M / D D / Y Y Y Y

Transaction ID: H490519.E21490

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

29.82

112.18

142.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

144.31

542.91

687.22

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 37 / 67
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Randolph & Wells Self Parking

Mailing Address

200 W. Randolph Street

City State Zip Code

Chicago IL 60601-

Purpose of Disbursement:
Parking ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31**[MEMO ITEM]** Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

102.00

Date M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 9

Transaction ID: H490519.E21470

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

21.42

80.58

102.00

B. Full Name (Last, First, Middle Initial)

Yellow Cab Management Inc.

Mailing Address

2230 South Michigan

City State Zip Code

Chicago IL 60616-

Purpose of Disbursement:
Cab ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31**[MEMO ITEM]** Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10.00

Date M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 9

Transaction ID: H490519.E21439

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.10

7.90

10.00

C. Full Name (Last, First, Middle Initial)

Globe Taxi Assn., Inc.

Mailing Address

4118 W. Lawrence

City State Zip Code

Chicago IL 60630-

Purpose of Disbursement:
Cab ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31**[MEMO ITEM]** Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20.00

Date M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 9

Transaction ID: H490519.E21552

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.20

15.80

20.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 38 / 67
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Choice Taxi Association

Mailing Address

6550 N Clark Street

City	State	Zip Code
Chicago	IL	60626-

Purpose of Disbursement:
 Cab Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10.00

Date

M	M
0	4

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21553

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.10

7.90

10.00

B. Full Name (Last, First, Middle Initial)
 Nancy Mercado

Mailing Address

3059 W 38th St

City	State	Zip Code
Chicago	IL	60632-2315

Purpose of Disbursement:
 Non-FEA Payroll

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

349165.74

Date

M	M
0	4

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21492

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

224.96

846.26

1071.22

C. Full Name (Last, First, Middle Initial)
 Nancy Mercado

Mailing Address

3059 W 38th St

City	State	Zip Code
Chicago	IL	60632-2315

Purpose of Disbursement:
 Non-FEA Payroll

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

405887.87

Date

M	M
0	4

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21493

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

224.96

846.26

1071.22

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

449.92

1692.52

2142.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 39 / 67
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Ed Murphy

Mailing Address

1150 Kylemore Ct.

City State Zip Code

Des Plaines IL 60016-

Purpose of Disbursement:

Non-FEA Payroll

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

374014.09

Date MM / DD / YYYY 04 / 15 / 2009

Transaction ID: H490519.E21495

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

222.96

838.76

1061.72

B. Full Name (Last, First, Middle Initial)

Ed Murphy

Mailing Address

1150 Kylemore Ct.

City State Zip Code

Des Plaines IL 60016-

Purpose of Disbursement:

Non-FEA Payroll

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

429260.52

Date MM / DD / YYYY 04 / 30 / 2009

Transaction ID: H490519.E21496

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

222.96

838.76

1061.72

C. Full Name (Last, First, Middle Initial)

Ed Murphy

Mailing Address

1150 Kylemore Ct.

City State Zip Code

Des Plaines IL 60016-

Purpose of Disbursement:

Reimbursement: See Memos

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

429371.83

Date MM / DD / YYYY 04 / 30 / 2009

Transaction ID: H490519.E21497

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

23.38

87.93

111.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

469.30

1765.45

2234.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 40 / 67
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Lance Trover

Mailing Address

616 N 5th St

City

State

Zip Code

Vienna

IL

62995-1633

Purpose of Disbursement:

Reimbursement: See Memos

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

350438.53

Date 04 / 15 / 2009

Transaction ID: H490519.E21500

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

61.14

229.98

291.12

B. Full Name (Last, First, Middle Initial)

Lance Trover

Mailing Address

616 N 5th St

City

State

Zip Code

Vienna

IL

62995-1633

Purpose of Disbursement:

Mileage Reimbursement

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

350631.03

Date 04 / 15 / 2009

Transaction ID: H490519.E21501

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

40.43

152.07

192.50

C. Full Name (Last, First, Middle Initial)

Lance Trover

Mailing Address

616 N 5th St

City

State

Zip Code

Vienna

IL

62995-1633

Purpose of Disbursement:

Non-FEA Payroll

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

352681.65

Date 04 / 15 / 2009

Transaction ID: H490519.E21502

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

430.63

1619.99

2050.62

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

532.20

2002.04

2534.24

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 41 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Lance Trover

Mailing Address

616 N 5th St

City

State

Zip Code

Vienna

IL

62995-1633

Purpose of Disbursement:

Non-FEA Payroll

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

409317.59

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

Transaction ID: H490519.E21503

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

430.63

1619.99

2050.62

B. Full Name (Last, First, Middle Initial)

Lance Trover

Mailing Address

616 N 5th St

City

State

Zip Code

Vienna

IL

62995-1633

Purpose of Disbursement:

Reimbursement: See Memos

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

409332.84

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

Transaction ID: H490519.E21505

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

3.20

12.05

15.25

C. Full Name (Last, First, Middle Initial)

Amanda Wears

Mailing Address

2030 W Irving Park Rd

City

State

Zip Code

Chicago

IL

60618-3910

Purpose of Disbursement:

Non-FEA Payroll

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

367921.94

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Transaction ID: H490519.E21509

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

322.36

1212.71

1535.07

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

756.19

2844.75

3600.94

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 42 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Amanda Wears

Mailing Address

2030 W Irving Park Rd

City

State

Zip Code

Chicago

IL

60618-3910

Purpose of Disbursement:

Non-FEA Payroll

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

424067.05

Activity or Event Identifier:

ADMINISTRATION B 31

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

Transaction ID: H490519.E21510

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

322.36

1212.71

1535.07

B. Full Name (Last, First, Middle Initial)

Amanda Wears

Mailing Address

2030 W Irving Park Rd

City

State

Zip Code

Chicago

IL

60618-3910

Purpose of Disbursement:

Reimbursement: See Memos

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

368013.24

Activity or Event Identifier:

ADMINISTRATION B 31

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Transaction ID: H490519.E21512

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

19.17

72.13

91.30

C. Full Name (Last, First, Middle Initial)

Amanda Wears

Mailing Address

2030 W Irving Park Rd

City

State

Zip Code

Chicago

IL

60618-3910

Purpose of Disbursement:

Reimbursement: See Memos

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

424255.65

Activity or Event Identifier:

ADMINISTRATION B 31

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

Transaction ID: H490519.E21513

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

39.61

148.99

188.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

381.14

1433.83

1814.97

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 43 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Joe Weiss

Mailing Address

1683 Constitution Dr

City

State

Zip Code

Glenview

IL

60026-7705

Purpose of Disbursement:

Non-FEA Payroll

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

347863.38

Date

M M

/

D D

/

Y Y

Y Y

0 4

1 5

2 0

0 9

Transaction ID: H490519.E21514

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

387.02

1455.92

1842.94

B. Full Name (Last, First, Middle Initial)

Joe Weiss

Mailing Address

1683 Constitution Dr

City

State

Zip Code

Glenview

IL

60026-7705

Purpose of Disbursement:

Non-FEA Payroll

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

404659.40

Date

M M

/

D D

/

Y Y

Y Y

0 4

3 0

2 0

0 9

Transaction ID: H490519.E21515

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

387.02

1455.92

1842.94

C. Full Name (Last, First, Middle Initial)

Joe Weiss

Mailing Address

1683 Constitution Dr

City

State

Zip Code

Glenview

IL

60026-7705

Purpose of Disbursement:

Mileage Reimbursement

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

347991.53

Date

M M

/

D D

/

Y Y

Y Y

0 4

1 5

2 0

0 9

Transaction ID: H490519.E21517

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

26.91

101.24

128.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

800.95

3013.08

3814.03

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 44 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Joe Weiss

Mailing Address

1683 Constitution Dr

City

State

Zip Code

Glenview

IL

60026-7705

Purpose of Disbursement:

Reimbursement: See Memos

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

348094.52

Date

M M

/

D D

/

Y Y

Y Y

0 4

1 5

2 0

0 9

Transaction ID: H490519.E21518

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

21.63

81.36

102.99

B. Full Name (Last, First, Middle Initial)
 Sams Club

Mailing Address

P.O. Box 660617, Dept. 49

City

State

Zip Code

Dallas

TX

75266-0617

Purpose of Disbursement:

Office Supply Reimbursement

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

[MEMO ITEM] Office Supply Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

50.46

Date

M M

/

D D

/

Y Y

Y Y

0 4

1 5

2 0

0 9

Transaction ID: H490519.E21482

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

10.60

39.86

50.46

C. Full Name (Last, First, Middle Initial)
 Walgreens Company

Mailing Address

200 Wilmot Road

City

State

Zip Code

Deerfield

IL

60015-

Purpose of Disbursement:

Office Supply Reimbursement

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

[MEMO ITEM] Office Supply Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

9.76

Date

M M

/

D D

/

Y Y

Y Y

0 4

1 5

2 0

0 9

Transaction ID: H490519.E21461

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2.05

7.71

9.76

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

21.63

81.36

102.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 45 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Office Max

Mailing Address

P.O. Box 9020

City State Zip Code

Des Moines IA 50368-

Purpose of Disbursement:
 Office Supply Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Office Supply Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

75.38

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Transaction ID: H490519.E21484

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

15.83

59.55

75.38

B. Full Name (Last, First, Middle Initial)
 Sprint PCS

Mailing Address

P.O. Box 740602

City State Zip Code

Cincinnati OH 45274-

Purpose of Disbursement:
 Cell Phone Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

74.99

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Transaction ID: H490519.E21524

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

15.75

59.24

74.99

C. Full Name (Last, First, Middle Initial)
 Randolph & Wells Self Parking

Mailing Address

200 W. Randolph Street

City State Zip Code

Chicago IL 60601-

Purpose of Disbursement:
 Parking Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

428.00

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Transaction ID: H490519.E21469

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

89.88

338.12

428.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 46 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

T-Mobile Wireless

Mailing Address

P.O. Box 790047

City

State

Zip Code

Saint Louis

MO

63179-

Purpose of Disbursement:

Cell Phone Reimbursement

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

151.75

Activity or Event Identifier:

ADMINISTRATION B 31

[MEMO ITEM] Cell Phone ReimbursementDate M M / D D / Y Y Y Y

Transaction ID: H490519.E21547

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

31.87

119.88

151.75

B. Full Name (Last, First, Middle Initial)

Gabatonis

Mailing Address

300 E. Laurel Street

City

State

Zip Code

Springfield

IL

62703-

Purpose of Disbursement:

Meal Reimbursement

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

31.50

Activity or Event Identifier:

ADMINISTRATION B 31

[MEMO ITEM] Meal ReimbursementDate M M / D D / Y Y Y Y

Transaction ID: H490519.E21462

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

6.62

24.88

31.50

C. Full Name (Last, First, Middle Initial)

Yellow Cab Management Inc.

Mailing Address

2230 South Michigan

City

State

Zip Code

Chicago

IL

60616-

Purpose of Disbursement:

Cab Reimbursement

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

26.00

Activity or Event Identifier:

ADMINISTRATION B 31

[MEMO ITEM] Cab ReimbursementDate M M / D D / Y Y Y Y

Transaction ID: H490519.E21438

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

5.46

20.54

26.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 47 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Giordanos

Mailing Address

308 W. Randolph Street

City	State	Zip Code
Chicago	IL	60606-

Purpose of Disbursement:
 Meal Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

23.07

Date

M	M
0	4

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21546

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.84

18.23

23.07

B. Full Name (Last, First, Middle Initial)
 Verizon Wireless

Mailing Address

P.O. Box 25506

City	State	Zip Code
Lehigh Valley	PA	18002-

Purpose of Disbursement:
 Cell Phone Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

587.45

Date

M	M
0	4

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21473

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

123.36

464.09

587.45

C. Full Name (Last, First, Middle Initial)
 Metra Rail

Mailing Address

547 W. Jackson

City	State	Zip Code
Chicago	IL	60661-

Purpose of Disbursement:
 Travel Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Travel Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

11.30

Date

M	M
0	4

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21539

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.37

8.93

11.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 48 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 City Service Taxi Association

Mailing Address

2601 W. Peterson Avenue

City	State	Zip Code
Chicago	IL	60659-

Purpose of Disbursement:
 Cab Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

19.00

Date

M	M
0	4

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21541

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.99

15.01

19.00

B. Full Name (Last, First, Middle Initial)
 Flash Taxi

Mailing Address

709 N. Main

City	State	Zip Code
Mount Prospect	IL	60056-

Purpose of Disbursement:
 Cab Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

18.00

Date

M	M
0	4

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21544

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.78

14.22

18.00

C. Full Name (Last, First, Middle Initial)
 24 Seven Taxi Association

Mailing Address

5606 N. Western Avenue

City	State	Zip Code
Chicago	IL	60659-

Purpose of Disbursement:
 Cab Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

25.00

Date

M	M
0	4

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21542

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.25

19.75

25.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 49 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Interpark

Mailing Address

55 E. Monroe

City

State

Zip Code

Chicago

IL

60603-

Purpose of Disbursement:
Parking ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31**[MEMO ITEM]** Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

28.00

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Transaction ID: H490519.E21523

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.88

22.12

28.00

B. Full Name (Last, First, Middle Initial)

Guzzardos Italian Vill.

Mailing Address

509 Pulaski Street

City

State

Zip Code

Lincoln

IL

62656-

Purpose of Disbursement:
Meal ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31**[MEMO ITEM]** Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

36.70

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Transaction ID: H490519.E21508

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.71

28.99

36.70

C. Full Name (Last, First, Middle Initial)

Chicago Dispatcher

Mailing Address

2341 W Belmont Ave

City

State

Zip Code

Chicago

IL

60618-

Purpose of Disbursement:
Cab ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31**[MEMO ITEM]** Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

18.00

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	9

Transaction ID: H490519.E21543

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.78

14.22

18.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 50 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Joe Weiss

Mailing Address

1683 Constitution Dr

City

State

Zip Code

Glenview

IL

60026-7705

Purpose of Disbursement:
Mileage ReimbursementCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

404766.65

Activity or Event Identifier:
ADMINISTRATION B 31Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

Transaction ID: H490519.E21519

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

22.52

84.73

107.25

B. Full Name (Last, First, Middle Initial)

Joe Weiss

Mailing Address

1683 Constitution Dr

City

State

Zip Code

Glenview

IL

60026-7705

Purpose of Disbursement:
Reimbursement: See MemosCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

404816.65

Activity or Event Identifier:
ADMINISTRATION B 31Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

Transaction ID: H490519.E21520

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

10.50

39.50

50.00

C. Full Name (Last, First, Middle Initial)

Sprint PCS

Mailing Address

P.O. Box 740602

City

State

Zip Code

Cincinnati

OH

45274-

Purpose of Disbursement:
Cell Phone ReimbursementCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

50.00

Activity or Event Identifier:
ADMINISTRATION B 31Date

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	9

Transaction ID: H490519.E21525

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

10.50

39.50

50.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

33.02

124.23

157.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 51 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Randolph & Wells Self Parking

Mailing Address

200 W. Randolph Street

City State Zip Code

Chicago IL 60601-

Purpose of Disbursement:
Parking ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31**[MEMO ITEM]** Parking Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

148.00

Date M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 9

Transaction ID: H490519.E21471

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

31.08

116.92

148.00

B. Full Name (Last, First, Middle Initial)

T-Mobile Wireless

Mailing Address

P.O. Box 790047

City State Zip Code

Saint Louis MO 63179-

Purpose of Disbursement:
Cell Phone ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31**[MEMO ITEM]** Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

100.00

Date M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 9

Transaction ID: H490519.E21548

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

21.00

79.00

100.00

C. Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address

P.O. Box 25506

City State Zip Code

Lehigh Valley PA 18002-

Purpose of Disbursement:
Cell Phone ReimbursementCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31**[MEMO ITEM]** Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

100.00

Date M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 9

Transaction ID: H490519.E21474

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

21.00

79.00

100.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 52 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 American Taxi

Mailing Address

5501 N. Chester Ave.

City	State	Zip Code
Chicago	IL	60656-

Purpose of Disbursement:
 Cab Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

33.00

Date

M	M
0	4

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21580

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.93

26.07

33.00

B. Full Name (Last, First, Middle Initial)
 Metra Rail

Mailing Address

547 W. Jackson

City	State	Zip Code
Chicago	IL	60661-

Purpose of Disbursement:
 Travel Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Travel Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

7.60

Date

M	M
0	4

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21540

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.60

6.00

7.60

C. Full Name (Last, First, Middle Initial)
 Flash Taxi

Mailing Address

709 N. Main

City	State	Zip Code
Mount Prospect	IL	60056-

Purpose of Disbursement:
 Cab Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

49.00

Date

M	M
0	4

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21545

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.29

38.71

49.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 53 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

DArcys Pint

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

78.09

Mailing Address

661 West Stanford Ave.

City

State

Zip Code

Springfield

IL

62703-

Purpose of Disbursement:

Meal Reimbursement

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

[MEMO ITEM] Meal ReimbursementDate M M / D D / Y Y Y Y

Transaction ID: H490519.E21576

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

16.40

61.69

78.09

B. Full Name (Last, First, Middle Initial)

Koam Taxi Association

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

55.00

Mailing Address

6330 N. Clark Street

City

State

Zip Code

Chicago

IL

60660-

Purpose of Disbursement:

Cab Reimbursement

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

[MEMO ITEM] Cab ReimbursementDate M M / D D / Y Y Y Y

Transaction ID: H490519.E21579

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

11.55

43.45

55.00

C. Full Name (Last, First, Middle Initial)

Taxi Affiliation Services, LLP

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

15.25

Mailing Address

2230 S Wabash Ave

City

State

Zip Code

Chicago

IL

60616-2110

Purpose of Disbursement:

Cab Reimbursement

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 31

[MEMO ITEM] Cab ReimbursementDate M M / D D / Y Y Y Y

Transaction ID: H490519.E21577

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

3.20

12.05

15.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 54 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 AT&T Mobility

Mailing Address

5565 Glenridge Connector

City State Zip Code
 Atlanta GA 30342-

Purpose of Disbursement:
 Cell Phone Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Cell Phone Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

111.31

Date M M / D D / Y Y Y Y
 0 4 / 3 0 / 2 0 0 9

Transaction ID: H490519.E21569

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

23.38

87.93

111.31

B. Full Name (Last, First, Middle Initial)
 Ariston Cafe

Mailing Address

413 N Old Route 66

City State Zip Code
 Litchfield IL 62056-

Purpose of Disbursement:
 Meal Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Meal Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

35.33

Date M M / D D / Y Y Y Y
 0 4 / 3 0 / 2 0 0 9

Transaction ID: H490519.E21575

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.42

27.91

35.33

C. Full Name (Last, First, Middle Initial)
 Top Cab

Mailing Address

2945 W Peterson Avenue

City State Zip Code
 Chicago IL 60659-

Purpose of Disbursement:
 Cab Reimbursement

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4.65

Date M M / D D / Y Y Y Y
 0 4 / 3 0 / 2 0 0 9

Transaction ID: H490519.E21578

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.98

3.67

4.65

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 55 / 67
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Mike Zolnierowicz

Mailing Address

3648 Venard Rd

City	State	Zip Code
Downers Grove	IL	60515-1349

Purpose of Disbursement:
 Non-FEA Payroll

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

365905.32

Date

M	M
0	4

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21527

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1426.01		5364.52		6790.53

B. Full Name (Last, First, Middle Initial)
 Mike Zolnierowicz

Mailing Address

3648 Venard Rd

City	State	Zip Code
Downers Grove	IL	60515-1349

Purpose of Disbursement:
 Reimbursement: See Memos

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

366386.87

Date

M	M
0	4

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21528

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
101.13		380.42		481.55

C. Full Name (Last, First, Middle Initial)
 Mike Zolnierowicz

Mailing Address

3648 Venard Rd

City	State	Zip Code
Downers Grove	IL	60515-1349

Purpose of Disbursement:
 Non-FEA Payroll

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

422379.33

Date

M	M
0	4

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21529

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
677.33		2548.03		3225.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2204.47		8292.97		10497.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 56 / 67
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Mike Zolnierowicz

Mailing Address
 3648 Venard Rd

City State Zip Code
 Downers Grove IL 60515-1349

Purpose of Disbursement:
 Reimbursement: See Memos

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

422531.98

Date MM / DD / YYYY
 04 / 30 / 2009

Transaction ID: H490519.E21531

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.06		120.59		152.65

B. Full Name (Last, First, Middle Initial)
 Illinois Department of Revenue

Mailing Address
 P.O. Box 88294

City State Zip Code
 Chicago IL 60680-

Purpose of Disbursement:
 Non-FEA Payroll Taxes

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

350147.41

Date MM / DD / YYYY
 04 / 15 / 2009

Transaction ID: H490519.E21533

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
206.15		775.52		981.67

C. Full Name (Last, First, Middle Initial)
 Illinois Department of Revenue

Mailing Address
 P.O. Box 88294

City State Zip Code
 Chicago IL 60680-

Purpose of Disbursement:
 Non-FEA Payroll Taxes

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

406686.21

Date MM / DD / YYYY
 04 / 30 / 2009

Transaction ID: H490519.E21534

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
167.65		630.69		798.34

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
405.86		1526.80		1932.66

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 57 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Illinois Department of Employment Securi

Mailing Address

PO Box 19300

City	State	Zip Code
Springfield	IL	62794-

Purpose of Disbursement:
 Non-FEA Unemployment Taxes

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

419153.97

Date

M	M
0	4

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21536

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

811.08

3051.21

3862.29

B. Full Name (Last, First, Middle Initial)
 Capital Data Technologies LLC

Mailing Address

3109 Cascade Drive

City	State	Zip Code
Springfield	IL	62704-

Purpose of Disbursement:
 Consulting:Tech, IT, Phone Maintena

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

378314.09

Date

M	M
0	4

 /

D	D
1	5

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21537

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

903.00

3397.00

4300.00

C. Full Name (Last, First, Middle Initial)
 Peapod Delivery

Mailing Address

9933 Woods Drive

City	State	Zip Code
Skokie	IL	60077-

Purpose of Disbursement:
 Office Supplies

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

378510.34

Date

M	M
0	4

 /

D	D
1	6

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21550

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

41.21

155.04

196.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1755.29

6603.25

8358.54

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 58 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 West Bend Mutual Insurance

Mailing Address

188 Industrial Dr., Ste. 430

City	State	Zip Code
Elmhurst	IL	60126-

Purpose of Disbursement:
 Non-FEA Insurance

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

401298.17

Date

M	M
0	4

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21554

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1782.90

6707.10

8490.00

B. Full Name (Last, First, Middle Initial)
 Midwest Mailing & Shipping Systems

Mailing Address

3006 Gill St., Ste. A

City	State	Zip Code
Bloomington	IL	61704-2509

Purpose of Disbursement:
 Office Supplies

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

391139.00

Date

M	M
0	4

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21555

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.88

22.14

28.02

C. Full Name (Last, First, Middle Initial)
 LexisNexis

Mailing Address

P.O. Box 2314

City	State	Zip Code
Carol Stream	IL	60132-

Purpose of Disbursement:
 Research Application

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

401627.52

Date

M	M
0	4

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21556

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

69.16

260.19

329.35

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1857.94

6989.43

8847.37

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 59 / 67
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Garland W. Brinner, CPA

Mailing Address

302 S. Hamilton Street

City State Zip Code

Lincoln IL 62656-

Purpose of Disbursement:
Accounting ServicesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

390516.50

Date MM / DD / YYYY
04 / 27 / 2009

Transaction ID: H490519.E21557

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

99.12

372.88

472.00

B. Full Name (Last, First, Middle Initial)

Lake Area Disposal Services

Mailing Address

2106 E. Cornell

City State Zip Code

Springfield IL 62703-

Purpose of Disbursement:
Waste DisposalCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

389802.18

Date MM / DD / YYYY
04 / 27 / 2009

Transaction ID: H490519.E21558

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

9.24

34.76

44.00

C. Full Name (Last, First, Middle Initial)

The Chicago Club

Mailing Address

P.O. Box 92737

City State Zip Code

Chicago IL 60676-

Purpose of Disbursement:
Party Room Rental & Catering NoCandCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

392663.80

Date MM / DD / YYYY
04 / 27 / 2009

Transaction ID: H490519.E21559

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

126.49

475.82

602.31

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

234.85

883.46

1118.31

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 60 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
Coffee Unlimited

Mailing Address

1408 South Clinton, #1701

City	State	Zip Code
Chicago	IL	60601-

Purpose of Disbursement:
Office SuppliesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

391703.13

Date

M	M
0	4

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21560

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2.26

8.49

10.75

B. Full Name (Last, First, Middle Initial)
Quicksilver Mailing Services

Mailing Address

P.O. Box 1454

City	State	Zip Code
Springfield	IL	62705-

Purpose of Disbursement:
Generic Non-FEA NoCand Mail ServiceCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

389758.18

Date

M	M
0	4

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21561

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

3.44

12.96

16.40

C. Full Name (Last, First, Middle Initial)
Hanson Information Systems

Mailing Address

2433 West White Oaks Dr.

City	State	Zip Code
Springfield	IL	62704-

Purpose of Disbursement:
Internet AccessCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

392808.17

Date

M	M
0	4

 /

D	D
2	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21562

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

30.32

114.05

144.37

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

36.02

135.50

171.52

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 61 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 United Parcel Service

Mailing Address

Lockbox 577

City State Zip Code

Carol Stream IL 60132-

Purpose of Disbursement:
 Parcel Delivery

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

389741.78

Date M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 9

Transaction ID: H490519.E21563

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21.31

80.17

101.48

B. Full Name (Last, First, Middle Initial)
 Commonwealth Edison

Mailing Address

Bill Payment Center

City State Zip Code

Chicago IL 60668-0001

Purpose of Disbursement:
 Utilities

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

391110.98

Date M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 9

Transaction ID: H490519.E21564

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

43.65

164.23

207.88

C. Full Name (Last, First, Middle Initial)
 Wells Fargo Financial Capital

Mailing Address

PO Box 7777

City State Zip Code

San Francisco CA 94120-7777

Purpose of Disbursement:
 Postage Meter Lease

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402437.53

Date M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 9

Transaction ID: H490519.E21565

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

155.40

584.61

740.01

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

220.36

829.01

1049.37

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 62 / 67
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Staples

Mailing Address

P.O. Box 30292

City State Zip Code

Salt Lake City UT 84130-

Purpose of Disbursement:
 Office Supplies

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

390903.10

Date M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 9

Transaction ID: H490519.E21566

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

81.19

305.41

386.60

B. Full Name (Last, First, Middle Initial)
 CT Adams Pest Control, Inc.

Mailing Address

815 S. Oaklane Road

City State Zip Code

Springfield IL 62712-

Purpose of Disbursement:
 Pest Control

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

401697.52

Date M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 9

Transaction ID: H490519.E21567

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14.70

55.30

70.00

C. Full Name (Last, First, Middle Initial)
 AT&T

Mailing Address

Bill Payment Center

City State Zip Code

Saginaw MI 48663-

Purpose of Disbursement:
 Telephone Service

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

389990.81

Date M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 9

Transaction ID: H490519.E21568

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

39.61

149.02

188.63

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

135.50

509.73

645.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 63 / 67
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 VoiceText.com

Mailing Address

211 East 7th Street 12th Floor

City State Zip Code

Austin TX 78701-

Purpose of Disbursement:
 Telephone Service

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

392061.49

Date M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 9

Transaction ID: H490519.E21570

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

75.26

283.10

358.36

B. Full Name (Last, First, Middle Initial)
 Access One

Mailing Address

820 W Jackson Blvd Fl 6

City State Zip Code

Chicago IL 60607-3026

Purpose of Disbursement:
 Telephone Service

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

402816.46

Date M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 9

Transaction ID: H490519.E21571

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

79.58

299.35

378.93

C. Full Name (Last, First, Middle Initial)
 DirecTV

Mailing Address

450 Pryor Blvd.

City State Zip Code

Sturgis KY 42459-

Purpose of Disbursement:
 Cable Television

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 31

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

391281.98

Date M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 9

Transaction ID: H490519.E21572

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

30.03

112.95

142.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

184.87

695.40

880.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 64 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 Ritz Carlton Hotel

Mailing Address

160 E. Pearson Street

City	State	Zip Code
Chicago	IL	60611-

Purpose of Disbursement:
 Party Fundraising Catering

Category/
Type

Activity or Event Identifier:
 ANNUAL DINNER

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

31305.12

Date

M	M
0	4

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21425

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14623.63

11625.93

26249.56

B. Full Name (Last, First, Middle Initial)
 Patricia Hurley & Associates, Inc.

Mailing Address

205 W. Wacker Drive, Ste. 1400

City	State	Zip Code
Chicago	IL	60606-

Purpose of Disbursement:
 Reimbursement: See Below

Category/
Type

Activity or Event Identifier:
 ANNUAL DINNER

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

31305.12

Date

M	M
0	4

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21431

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1748.54

1390.11

3138.65

C. Full Name (Last, First, Middle Initial)
 Patricia Hurley & Associates, Inc.

Mailing Address

205 W. Wacker Drive, Ste. 1400

City	State	Zip Code
Chicago	IL	60606-

Purpose of Disbursement:
 Party Printing and Office Supplies

Category/
Type

Activity or Event Identifier:
 ANNUAL DINNER

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

31305.12

Date

M	M
0	4

 /

D	D
0	7

 /

Y	Y	Y	Y
2	0	0	9

Transaction ID: H490519.E21432

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1067.91

849.00

1916.91

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

17440.08

13865.04

31305.12

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 65 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)
 FedEx

Mailing Address

P.O. Box 727

City State Zip Code
 Memphis TN 38101-2112

Purpose of Disbursement:
 Parcel Delivery Reimbursement

Category/
Type

Activity or Event Identifier:
 ANNUAL DINNER

[MEMO ITEM] Parcel Delivery Reimbursement

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

31305.12

Date 04 / 07 / 2009

Transaction ID: H490519.E21433

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

19.30

15.35

34.65

B. Full Name (Last, First, Middle Initial)
 NOVA Printing

Mailing Address

2711 N. Pulaski

City State Zip Code
 Chicago IL 60639-

Purpose of Disbursement:
 Party Printing Reimbursement

Category/
Type

Activity or Event Identifier:
 ANNUAL DINNER

[MEMO ITEM] Party Printing Reimbursement

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

31305.12

Date 04 / 07 / 2009

Transaction ID: H490519.E21434

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

910.86

724.14

1635.00

C. Full Name (Last, First, Middle Initial)
 The Flower Firm

Mailing Address

170 N. Racine Ave.

City State Zip Code
 Chicago IL 60607-

Purpose of Disbursement:
 Decoration Reimbursement

Category/
Type

Activity or Event Identifier:
 ANNUAL DINNER

[MEMO ITEM] Decoration Reimbursement

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

31305.12

Date 04 / 07 / 2009

Transaction ID: H490519.E21435

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

348.19

276.81

625.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 66 / 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Illinois Republican Party

A. Full Name (Last, First, Middle Initial)

Stu Hirsh Orchestra

Mailing Address

1617 Brummel St.

City State Zip Code

Evanston IL 60202-

Purpose of Disbursement:
Musical Entertainment ReimbursementCategory/
Type

Activity or Event Identifier:

ANNUAL DINNER

[MEMO ITEM] Musical Entertainment Reimbursement

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

31305.12

Date M M / D D / Y Y Y Y

0 4 / 0 7 / 2 0 0 9

Transaction ID: H490519.E21436

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

348.19

276.81

625.00

B. Full Name (Last, First, Middle Initial)

Yellow Cab Management Inc.

Mailing Address

2230 South Michigan

City State Zip Code

Chicago IL 60616-

Purpose of Disbursement:
Cab ReimbursementCategory/
Type

Activity or Event Identifier:

ANNUAL DINNER

[MEMO ITEM] Cab Reimbursement

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

31305.12

Date M M / D D / Y Y Y Y

0 4 / 0 7 / 2 0 0 9

Transaction ID: H490519.E21437

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

35.10

27.90

63.00

C. Full Name (Last, First, Middle Initial)

Ritz Carlton Hotel

Mailing Address

160 E. Pearson Street

City State Zip Code

Chicago IL 60611-

Purpose of Disbursement:
Parking ReimbursementCategory/
Type

Activity or Event Identifier:

ANNUAL DINNER

[MEMO ITEM] Parking Reimbursement

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

31305.12

Date M M / D D / Y Y Y Y

0 4 / 0 7 / 2 0 0 9

Transaction ID: H490519.E21440

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

86.91

69.09

156.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

46581.67

123492.80

170074.47

SCHEDULE L-B (FEC Form 3X) **ITEMIZED DISBURSEMENTS** **OF LEVIN FUNDS**

Use separate schedule(s)
for each category of the
Aggregation Page

FOR LINE NUMBER:
(check only one)

PAGE 67 / 67

☐ 4a ☐ 4c ☒ 5
☐ 4b ☐ 4d

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NAME OF COMMITTEE (In Full)
 Illinois Republican Party

A.	Full Name (Last, First, Middle Initial) / Full Organization Name The Northern Trust Company Mailing Address 50 S. La Salle St. City State Zip Code Chicago IL 60675 Purpose of Disbursement Service Fee	Transaction ID: 4B90519.E21574 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>20.00</div> Account: LEVIN
B.	Full Name (Last, First, Middle Initial) / Full Organization Name Illinois Republican Party Mailing Address Northern Trust Non-Federal Account 205 W. Randolph Suite 1245 City State Zip Code Chicago IL 60606 Purpose of Disbursement Transfer of Funds	Transaction ID: 4B90519.E21581 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 3 0 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>4000.00</div> Account: LEVIN

SUBTOTAL of Disbursements This Page (optional)

4020.00

TOTAL This Period (last page this line number only)

4020.00